PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

 ${\bf Application} \ {\bf or} \underline{{\bf D}} {\bf ocket} \ {\bf Number}$

0145010

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
			(Column	(Column 1)		(Column 2)		TYPE		OR	OR SMALL ENTITY		
TOTAL CLAIMS			· 46					RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			ኒር minus 20=		* 12 6			X\$ 9=		OR	X\$18=	·463	
INDEPENDENT CLAIMS			√ minus 3 =					X43=		OR	X86=	36	
ML	ILTIPLE DEPEN	RESENT					+145=		OR	+290=			
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2	L	TOTAL		OR	TOTAL	021	
CLAIMS AS AMENDED - PART II								•		_	OTHER	THAN	
		(Column 1)		(Colur		(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE ·	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent			L	CLAINA	=		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=	·	OR	+290=		
								TOTAL		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)											ADDIT: I EE		
		CLAIMS		HIĞH	EST	*	Г		ADDI-			ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**	-	=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.145-			+290=		
								+145= TOTAL	*	OR			
										OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	:	= .		X\$ 9=		OR	X\$18=		
	Independent	*	Minus ·	***		=		X43=		oR	X86=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	` 									
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290=		
** }	f the "Highest Nu	mber Previously Pa mber Previously Pa	id For" IN THIS	S SPACE is	less than	20, enter "20."	A	TOTAL DDIT. FEE	•	OR ,	TOTAL ADDIT. FEE		
		iber Previously Paid					foun	d in the app	ropriate box	in col	umn 1.		